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BY MAIL

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MISSOURI
DIVISION

Michael Howell

Imn # 225462

Booking # 2018010014

(Enter above the full name of the
Plaintiff in this action. Include prison
registration number.)

v.

St. Louis County Jail (mo.)

Lt. Reed

Lt. Porter (Shift Supervisor)

Lt. Corona

Lt. Sutherland

(Enter above the full name of ALL Defend-
ant(s) in this action. Fed. R. Civ. P. 10(a)
requires that the caption of the complaint
include the names of all the parties. Merely
listing one party and "et al." is insufficient.
Please attach additional sheets if necessary.

Case No. _____
(To be assigned by Clerk)

In what capacity are you suing the
defendants?

- ☒ Official
☐ Individual
☐ Both

PRISONER CIVIL RIGHTS COMPLAINT UNDER 42 U.S.C. § 1983

I. PLACE OF PRESENT CONFINEMENT:

St. Louis County Jail

II. PREVIOUS CIVIL ACTIONS:

- A. Have you brought any other civil actions in state or federal court dealing with the
same facts involved in this action or otherwise relating to your confinement?

YES []

NO [X]

United States District Court
Eastern District of Missouri
Division

Michael Howell
Imn. # 225462
Booking # 2018010014

(Plaintiff)

v. (cont.)

Case no. _____

Lt. Mohler
Lt. Woods
Lt. O'Brien
Lt. Hayden
ofc. Mitchell
ofc. Roberson
(And A host of other officers)
Captain Bracy
Captain Ishmon

in what capacity are you
suing the defendants?

☒ official
☐ individual
☐ Both

- B. If your answer to "A" is YES, describe the action(s) in the space below. If there is more than one action, you must describe the additional action(s) on a separate piece of paper, using the same format as below.

1. Parties to previous civil action:

Plaintiff: _____

Defendant(s): _____

2. Court where filed: _____

3. Docket or case number: _____

4. Name of Judge: _____

5. Basic claim made: _____

6. Present disposition (Is the case still pending? Is it closed? If closed, was it appealed?): _____

III. GRIEVANCE PROCEDURES:

- A. Is there a prisoner grievance procedure at the institution in which you are incarcerated?

YES ☒

NO ☐

- B. Have you presented this grievance system the facts which are at issue in this complaint?

YES ☐

NO ☒

C. If your answer to "B" is YES, what steps did you take: _____

D. If your answer to "B" is NO, explain why you have not used the grievance system:

24 HR. infirmary stay, then 6 months in the Hole.
was not informed of grievance system. 7 day dead-
line has passed.

IV. PARTIES TO THIS ACTION:

A. Plaintiff

1. Name of Plaintiff: Michael Howell
2. Plaintiff's address: 2817 West. Milton St. Louis, MO. 63114
3. Registration number: _____

B. Defendant(s)

1. Name of Defendant: St. Louis County Jail (mo.)
2. Defendant's address: 100 S. Central Ave. Clayton, MO. 63105
3. Defendant's employer and job title: _____
4. Additional Defendant(s) and address(es): Lt. Corona, Lt. Reed,
Lt. Porter (supervisor), Lt. Sutherland,
Lt. Mahler, Lt. Woods, Lt. O'Brien,
Lt. Hayden, (A host of other officers)
Captain Bracy, ofc. Mitchell, ofc. Roberson,
and Captain Ishmon.
(all employed at above address)

V. COUNSEL

A. Do you have an attorney to represent you in this action?

YES []

NO [X]

B. If your answer to "A" is NO, have you made an effort to contact an attorney to represent you in this matter?

YES [X]

NO []

C. If your answer to "B" is YES, state the name(s) and address(es) of the attorneys you contacted and the results of those efforts:

Philip H. Dennis, Esq.

314-371-7300

D. If your answer to "B" is NO, explain why you have not made such efforts:

E. Have you previously been represented by counsel in a civil action in this Court?

YES []

NO [X]

F. If your answer to "E" is YES, state the attorney's name and address:

- VI. Statement of claim (State as briefly as possible the facts of your case. Describe how each defendant is involved. You must state exactly what each defendant personally did, or failed to do, which resulted in harm to you. Include also the names of other persons involved, dates, and places. Be as specific as possible. State your claims in numbered paragraphs. You may use additional paper if necessary):

on 10/24/2019, at 08:50 Hours; during the Housing units medication call; I asked to see the Nurse first because I was in a disagreement with C/O Roberson, which was escalating due to how she talks down to inmates. Due to A Personality Disorder and PTSD, I wanted and needed to cool off. When Confronted by C/O's and Lt. Porter, I recieved the same treatment as from C/O Roberson.

Enclosed, you will find the C/O staff's version of how things escalated. I do agree that I was pepper sprayed, And Tasered (not once, but twice); excessive force and restraint Chair was used against me. I have RA, (3) heart stints, A hip replacement (where I was tasered once and Rt side below Ribcage. C/O Staff and Medical Staff were aware of my medical condition at my arrival yet did not bring that information in regard while I was humiliated, belittled and forced to sit in a Restraint chair, aggravating my Hip and RA. I am also having flashbacks of this event. I Am also still experiencing

VI. Statement of Claim (Continued)

Pain from being tasered and have not recieved any further treatment from medical.

Included is A medical Assessment sheet that is detailing my medical Condition as well as a List of all medications I am currently taking

Thank You.

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VII. RELIEF

State briefly and exactly what you want the Court to do for you. Do not make legal arguments. (Note: If you are a **state** prisoner and you seek from this Court relief that affects the length or duration of your imprisonment, your case **must** be filed on a § 2254 form.)

Pain and Suffering
Mental anguish
Loss of tax Returns (3 yrs. worth)

VIII. MONEY DAMAGES:

A) Do you claim either actual or punitive monetary damages for the acts alleged in this complaint?

YES ☒ NO ☐

B) If your answer to "A" is YES, state below the amount claimed and the reason or reasons you believe you are entitled to recover such money damages:

\$30,000,000 Prison facility couldn't
help me recover money (\$9,000) from my
debt used.

IX. Do you claim that the wrongs alleged in the complaint are continuing to occur at the present time?

YES ☒ NO ☐

Signature of attorney or pro se Plaintiff

Date

SUBSEQUENT FILINGS

Certificate of Service

To file a motion, pleading or other paper, you must submit the original document to the Court Clerk. The original document must include a certificate of service which should be in the following form:

Certificate of Service	
I hereby certify that a copy of the foregoing was mailed	
to _____ at _____	
[Opposing Party or Counsel]	[Address]
on _____, 20__.	
[Date]	[Your Signature]

Any pleading or document received by the court that fails to include a certificate of service may be returned. In addition to filing the original document with the court, you must mail a copy of each document to all other parties, or if they have counsel, to their attorney(s).

Motions Filed By Other Parties

If you do not timely respond to a motion filed by another party, you may waive your right to challenge the subject matter of the motion. Applicable time periods are set forth in the Federal Rules of Civil Procedure and the Court's Local Rules.

Letters to the Court

It is improper to send letters directly to district or magistrate judges regarding cases pending before them. All correspondence should be forwarded to the Clerk of Court. Copies of correspondence should also be sent to all other parties, or if they have counsel, to their attorney(s).

MAILING

All correspondence, fees, legal documents, etc. should be mailed to the following address:

Clerk of Court
United States District Court
Eastern District of Missouri
111 S. Tenth Street, Suite 3.300
St. Louis, MO 63102